# FORM D SEP 2 3 2002 VI

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

# FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
FORM LIMITED OFFERING EXEMPTION

1178261
OMB APPROVAL
OMB Number: 3235-0076 Expires: April 30, 1991
Estimated average burden hours per response 16.00
SEC USE ONLY
Profix Carial

	UNIFORM LIMITED OFFERING EX	EMP HON	
Name of Offering ( check	if this is an amendment and name has changed, and is	ndicate change.)	
THE GLADYS SIEGELMAN	COMPANY_LLC		
Filing Under (Check box(es) th	at apply):   Rule 504 Rule 505 Rule 506	□ Section 4(6)	□ ULOE
Type of Filing:	g 🖾 Amendment		
	A. BASIC IDENTIFICATION DATA	7 147	
1. Enter the information reques	sted about the issuer		
Name of Issuer ( check if	this is an amendment and name has changed, and indi-	rate change.)	02058914
The Gladys Siegelman			
Address of Executive Offices C/O Phoenix Producti 420 East Patrick Str	(Number and Street, City, State, Zip Code) ceet. Suite 200. Frederick. MD 21701	Telephone Number (301) 582	er (Including Area Code) -5944
	Operations (Number and Street, City, State, Zip Code)	Telephone Numb	er (Including Area Code)
Brief Description of Business		<u> </u>	PROGRAFIO
•	Production of the national touring the dramatic work entitled "The Va	•	1 1 11 11 11 11 11 11 11 11 11 11 11 11
			THOM
Type of Business Organization  Corporation	☐ limited partnership, already formed	☑ other (please sp	
D business trust	☐ limited partnership, to be formed		Company
Actual or Estimated Date of In	•		stimated
Jurisdiction of Incorporation o	r Organization: (Enter two-letter U.S. Postal Service al CN for Canada; FN for other foreign		e: NY

## **GENERAL INSTRUCTIONS**

### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filled with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

### State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless successemption is predicated on the filing of a federal notice.

2 1740B	A. BASIC IDENT	FICATION DATA		
2. Enter the information requested for the	íoliowing:			
• Each promoter of the issuer, if the is	ssuer has been organized	s within the past five yes	ars;	
<ul> <li>Each beneficial owner having the pov securities of the issuer;</li> </ul>	wer to vote or dispose, c	e direct the vote or dispo	osition of, 10%	or more of a class of equit
<ul> <li>Each executive officer and director of</li> </ul>	corporate issuers and o	corporate general and n	nanaging partner	rs of partnership issuers: an
• Each general and managing partner				
Check Box/es) that Apply:   Promoter		☐ Executive Officer	Director	Ceneral and/or Managing Partner
Full Name (Last name first, if individual)				country of active
Business of Residence Address (Number a	and Street, City, State,	in Code)		Political Politi
business of Residence Address (Number 8		ap code)		
Check Box(es) that Apply:   □ Promoter	D Beneficial Owner	O Executive Officer	D Director	O General and/or Managing Partner
Full Name (Last name first, if individual)	•		ere e de la companya	
Business or Residence Address (Number a	and Street, City, State,	Lip Code)	**************************************	
Check Box(es) that Apply:   Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	General and/or Managing Partner
Full Name (Last name first, if individual)	·			
Business or Residence Address (Number a	and Street, City, State, 2	Zin Code)		
Desines of Residence Address Vivanoci e	and Direct, City, Dialo,			
Check Box(es) that Apply:   Promoter	☐ Beneficial Owner	☐ Executive Officer	D Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
Business or Residence Address (Number 8	and Street, City, State,	Zip Codé)	<b>*</b> *	
Check Box(es) that Apply:     Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if individual)				
Business or Residence Address (Number a	and Street, City, State,	Zip Code)	<del></del>	
Check Box(cs) that Apply:   □ Promoter	☐ Beneficial Owner	☐ Executive Officer	D Director	☐ General and/or Managing Partner
Pull Name (Last name first, if individual)			d.º	
Business or Residence Address (Number s	and Surea, City, State, 2	Zip Code)		
Check Box(es) that Apply:   Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)	:			
Business or Residence Address (Number a	and Street City State	Zin Code)		

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	<del></del>	· · · · · · · · · · · · · · · · · · ·		B. 1	NFORMA	YON AB	OUT OFF	ERING				V	N'a
I. Has	the issuer	sold, or d	oes the iss	uer intend	to sell, to	пол-вссте	dited inver	stors in thi	s offering	7	• • • • • • • • •	Yes 🗆	No
		1 20 202	5645076 <b>An</b>	swer also	in Append	ix, Colum	n 2; if fili	ng under L	JLOE. 191	:			
2. Wha	it is the mi	nimum in	vestment t	hat will be	accepted	from any	individual?	) (1.5)	<b></b>	·		. \$	
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					single un							🗆	
sion to be list t or de	or similar r listed is a he name of ealer, you	remunerati n associate f the broke may set fo	on for solic ed person of er or deale orth the int	citation of or agent of r. If more formation	n who has purchasers a broker than five for that b	in connect or dealer r (5) persons roker or d	tion with si egistered v to be liste ealer only.	ales of securith the SE ed are asso	irities in th Cand/or ciated per	e offering. with a state sons of suc	If a person e or states h a broke	n 1 '1 1	
Full Name	e (Last nar	ne first, if	individua	)	Cod:	37, Binte, 2	il) Jeriil	304 <b>3</b> 05		(15 t t H ); 	क्षा कर हर	तारवरी	
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		e Address	(Number	and Stree	City, Sta	ite. Zip Co	ode)	;		· · · · · · · · · · · · ·			
nag Maden	Oga ii												
Name of	Associated	Broker or	Dealer									<del></del>	
			•								•		
States in \	Which Pers	son Listed	Has Solic	ited or Int	ends to So	blicit Purch	nasers						
			k individu	~								□ All Si	tates
[AL]	[AK]	[AZ]	[AR]	[CA]	(CO)	(CT)	[ DE ]	{DC}	(FL)	[GA]	(HI)	(ID)	
[IL]	[IN]	[ [ A ]	(KS)	[KY]	[LA]	(ME)	[MD]	[MA]	(MI)	[MN]	[MS]	(MO)	
[MT]	[NE]	[NV]	[NH]	[ [ [ ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	
[ R1 ]	[ SC ]	[SD]	$\{TN\}^{\circ}$	[TX]	(UT)	{ VT } .	[VA]	[W 4]	{WV}	[WI]	[WY]	(PR)	
	or Residence Associated	····		and Stree	i, City, Sta	ate, Zip Co	ode)						
States in 1	Which Per	son Listed	Has Solic	ited or Int	ends to Sc	licit Purcl	hasers		· · · · · · · · · · · · · · · · · · ·		<del> </del>		
(Check	"All State	s" or chec	k individu	al States)				<b></b>		.,		C All S	tates
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	(GA)	[HI]	[ ID ]	
[IL]	[IN]	[ AI ]	(KS)	[KY]	[LA]	(ME)	[MD]	[MA]	[ M1 ]	(MN)	[MS]	[MO]	
[MT] [RI]	[NE]	[NV]	(NH)	[ UJ ] [ XX ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	
		[SD]	[TN]		[UT]	[VT]	[VA]	[WA]	[WV]	[W]]	[WY]	(PR)	
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PRINCS? (	n Kesideno	t Address	(Number	and Street	t, City, Su	ite, Zip U	DGC)						
Name of	Associated	Broker or	Dealer			<del></del>	·						
	IEICU	DIOREI UI											
States in V	Which Per	son Listed	Has Solic	ited or Int	tends to Sc	olicit Purcl	hasers			· · · · · · · · · · · · · · · · · · ·			
1 1	fig. he had been										•	□ All S	iaies
(AL)	[AK]		[AR]		[00]			[DC]	[FL]	[GA]	(HI)	[ ID ]	
[ IL ]	•		(_KS_]	- {KY}	(LA)	{ME}-	[MD]	[MA]	TI[MI]	[MN]	[MS]	[MO]	_
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[ RI ]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	{WV}	(WI)	[WY]	[PR]	ì

 C. OFFERING PRICE, MUMBER OF INVESTORS, EXPENSES AND USE	OF PROCEEDS		
Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." if the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			
Type of Security	Azgregate Offering Price	•	Amount Already Sold
Debt	<u>\$0</u>	_	§0
Equity	<u>0</u>	:	0
□ Common □ Preferred			
Convertible Securities (including warrants)			0
Patnership interests	\$ 0	<u>-</u> , :	<u> </u>
Other (Specify Limited Liability Company Interests)	<u>s 650,000</u>		650,000
รับเล่		•	
Answer also in Appendix, Column 3, if filing under ULOE.			
Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number		Aggregate Dollar Amount
	Investors 19		of Purchases
Accredited Investors		_	650,000
Non-accredited Investors		_ '	\$ <u> </u>
Total (for filings under Rule 504 only)		- '	SN/A
Answer also in Appendix, Column 4, if filing under ULOE.			
If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.	T		Dollar Amoun
Type of offering	Type of Security		Sold
Rule SOS		_	<u> </u>
Regulation A		_	<u> </u>
Rule 504	<i>.</i>		\$N/A
Total		_	s_N/A_
a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future confingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
Transfer Agent's Fees			<u>s0</u>
Printing and Engraving Costs		Ø	<u>\$ 500</u>
Legal Fees		<b>3</b> 3	<u>s</u> 3,000
Acounting Fees		<b>3</b>	<u> 1,000</u>
Engineering Fees		כ	\$0
Sales Commissions (specify finders' fees separately)		)	§0
Other Expenses (identify)		כ	\$0
Total		¥	<u>\$_4,500</u>

	27.60 / 20 20 10 15 2					
C. OFFERING PRICE, NUMBE	R OF INVESTORS, EXPENSES AND	USE	OF PROCEE	DS		
b. Enter the difference between the aggregate off tion I and total expenses furnished in response to "adjusted gross proceeds to the issuer."	Part C - Question 4.a. This difference	is the	<b>.</b>		s <u>6</u>	45,500
5. Indicate below the amount of the adjusted gross used for each of the purposes shown. If the amount estimate and check the box to the left of the estimate adjusted gross proceeds to the issuer set forth	unt for any purpose is not known, furn	ish an equal	• •	; i ·		
and any and grown processes to the page, at forth	i in the point to that C = Question 4.0 i		Payments to Officers, Directors, &		P	ayanenu To
			A ffiliator			<b>~</b> ^ \
Salaries and fees			0	<u> </u>	. <b>\$</b>	7,000
Purchase of real estate						0
Purchase, rental or leasing and installation of	Speciment and equipment	_ ·	0	- n		0
Construction or leasing of plant buildings and	* *					
·		L 3.		_ ⊔	2	
Acquisition of other businesses (including the offering that may be used in exchange for the issuer pursuant to a merger)	e assets or securities of another	2 D	0	· []	\$	0
Repayment of indebtedness	'				s_	
Working capital		_	-		-	38,500
·						
Other (specify):	•	. LJ \$.		_ ⊔	2	0
	· · · · · · · · · · · · · · · · · · ·					
	·····	D \$.	0	_ 0	<b>S</b>	0
Column Totals		D \$.	0	_ 🖾	<u>s 6</u>	45,500
Total Payments Listed (column totals added)			⊠ \$ <u>6</u>	45,5	00	
<del></del>	D. FEDERAL SIGNATURE					
The issuer has duly caused this notice to be signed by following signature constitutes an undertaking by the quest of its staff, the information furnished by the is	issuer to furnish to the U.S. Securities a	nd Exc	change Comm	ission,	upo	on written r
ssuer (Print or Type)	Signature		Dat	e		
The Gladys Siegelman Company, LLC	Site			9/17	/02	
Name of Signer (Print or Type)	Title of Signer (Print or Type)					
Off Road Theatricals, L.L.C.						

of such rule?		D 🖪
		3005 1116
2. The undersigned issuer hereby und iform D (17 CFR 239.500) at such	lertakes to furnish to any state administrator of any state fames as required by state faw.	ate in which this potice is field, a notice o
3. The undersigned issues hereby unth issues to offerees.	katiska: to finalish to the state administrators, upon w	ricles request, information furnished by th
A The undersianed issues represents t	that the issuer is samiliar with the conditions that mu	re the maticipant to the amoistant as an area
Smited Offering Exemption (ULOE of this exemption has the burden of	E) of the state in which this notice is filed and undersu of establishing that these conditions have been satisfic	ands that the issuer dalming the availabilited.
Smited Offering Exemption (ULOE of this exemption has the burden of	E) of the state in which this notice is filed and undersu	ands that the issuer claiming the availabilited.  his notice to be signed on his behalf by th
Emited Offering Exemption (ULOE of this exemption has the burden of the issuer has read this notification and undersigned duly authorized person.	E) of the state in which this notice is filed and understand of establishing that these conditions have been satisfied knows the contents to be true and has duly caused to be true and the true and true and the true and the true and the true and the true and true	ands that the issuer claiming the availabilited.  his notice to be signed on his behalf by the
Emited Offering Exemption (ULOE of this exemption has the burden of the Issuer has read this notification and	E) of the state in which this notice is filed and undersulated of establishing that these conditions have been satisfied knows the contents to be true and has duly caused to Signature	ands that the issuer claiming the availabilited.  his notice to be signed on his behalf by the

### Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notion on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

	<b>FPENDIX</b>	

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	to non-ac investors	to sell ccredited in State Item 1)	Type of security and aggregate offering price offered in state (Part C-Item!)	Type of investor and amount purchased in State					Disqualification under State ULOE (if yes, attach explanation of waiver granted)  (Part E-Item1)		
State	Yes	No	٠٠٠	N		Number of	-	Yes a	No		
AL			25:10 1 42 10 1.J C	izzi. Tunto	andra de person	e saw Melut de Lui		ា រប់ជា ខេ			
AK	etty gaer in de	Bas ta in		grand see The	\$ 1 \$ 1 m		7 (A 48 5 ) 7 (A 4		,		
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IL		X	LLC Interests \$ 25,000	2	\$ 50,000	0	0		Х		
IN											
<u>IA</u>						·					
KS							_				
KY			· *ts								
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MD		Х	LLC Interests \$125,000	i	\$125,000	0	0		Х		
MA		Х	LLC Interests \$ 50,000	1	\$ 50,000	0	0		Х		
МІ			·								
MN											
MS		୍ଟର ଫେଟ ୧୯୬	त्रक्रात विकास स्थापन क्रिकेट विकास है। जिल्लाहरू स्थापन स्थापन स्थापन है।	1.20 mm - 1.20 m		To the state of th					
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APPENDIX
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	intend to non-a investor	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Iteral)	Type of investor and recount purchases) in State (Part C-Rem 2)			Disqualification under State ULO (if yes, attach explanation of waiver granted) (Part E-Item1)		
State	/es	No		Number of Accredited Investors	Amount	Number of Non-Accredited investors	Amount	Yes	No
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NE	.,						a verta con		
NV								<b>DE</b> 150	
NH								,	
NJ									
NM		Х	LLC Interests \$ 25,000	1	\$ 25,000	0	0		X
NY		X.	LLC Interests \$225,000	9	\$225,000	0	00		Х
NC									
ND									
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OK						,			
OR	,								-
PA									
RI		Х	LLC Interests \$ 50,000	2	\$ 50,000	0	0		Х
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SD									
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UT		Х	LLC Interests \$ 50,000	2	\$ 50,000	0	0		Х
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PR		Total Paris	14 14 14 14 14 14 14 14 14 14 14 14 14 1						